

**UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MASSACHUSETTS**

IN RE PHARMACEUTICAL INDUSTRY AVERAGE WHOLESAL PRICE LITIGATION	MDL No. 1456
THIS DOCUMENT RELATES TO: ALL ACTIONS	CIVIL ACTION: 01-CV-12257-PBS Judge Patti B. Saris

**JOINT NOTICE OF FILING PROPOSED ORDER REGARDING FOLLOW UP
MAILING TO CONSUMERS WHO HAVE FILED A NOTICE OF
EXCLUSION FROM SETTLEMENT**

Having conferred with Professor Francis McGovern, the Court appointed Special Master with respect to the proposed settlement between Class Plaintiffs and GlaxoSmithKline (“GSK”), the parties understand that based on the results of the telephone survey of consumers who have filed a Notice of Exclusion with respect to the settlement, Professor McGovern proposes a follow up mailing composed of a cover letter (attached hereto as Exhibit A), list of GSK covered drugs and a Claim Form to all consumers who have filed a Notice of Exclusion with respect to the settlement. Professor McGovern has conferred with the parties on the substance of that mailing and at his request we hereby provide the Court with a proposed order regarding the follow up mailing for the Court’s consideration. The proposed order is attached hereto as Exhibit B.

DATED: June 21, 2007

By /s/ Steve W. Berman

Thomas M. Sobol (BBO#471770)
Edward Notargiacomo (BBO#567636)
Hagens Berman Sobol Shapiro LLP
One Main Street, 4th Floor
Cambridge, MA 02142
Telephone: (617) 482-3700
Facsimile: (617) 482-3003

LIAISON COUNSEL

Steve W. Berman
Sean R. Matt
Robert F. Lopez
Hagens Berman Sobol Shapiro LLP
1301 Fifth Avenue, Suite 2900
Seattle, WA 98101
Telephone: (206) 623-7292
Facsimile: (206) 623-0594

Elizabeth A. Fegan
Hagens Berman Sobol Shapiro LLP
60 W. Randolph Street, Suite 200
Chicago, IL 60601
Telephone: (312) 762-9235
Facsimile: (312) 762-9286

Eugene A. Spector
Jeffrey Kodroff
Spector, Roseman & Kodroff, P.C.
1818 Market Street, Suite 2500
Philadelphia, PA 19103
Telephone: (215) 496-0300
Facsimile: (215) 496-6611

Kenneth A. Wexler
Jennifer Fountain Connolly
Wexler Toriseva Wallace LLP
One North LaSalle Street, Suite 2000
Chicago, IL 60602
Telephone: (312) 346-2222
Facsimile: (312) 346-0022

Marc H. Edelson
Edelson & Associates LLC
45 West Court Street
Doylestown, PA 18901
Telephone: (215) 230-8043
Facsimile: (215) 230-8735

Donald E. Haviland, Jr.
The Haviland Law Firm, LLC
740 S. Third Street
Third Floor
Philadelphia, PA 19147
Facsimile: (215) 609-4661
Telephone: (215) 392-4400

**CO-LEAD COUNSEL FOR
PLAINTIFFS**

DATED: June 21, 2007

**COUNSEL FOR DEFENDANT
SMITHKLINE BEECHAM
CORPORATION, D/B/A
GLAXOSMITHKLINE (“GSK”)**

By /s/ Frederick G. Herold
Frederick G. Herold
DECHERT LLP
1117 California Avenue
Palo Alto, CA 94304
Telephone: (650) 813-4930
Facsimile: (650) 813-4848

Mark H. Lynch
Geoffrey E. Hobart (BBO #547499)
Ronald G. Dove, Jr.
COVINGTON & BURLING
1201 Pennsylvania Avenue, N.W.
Washington, D.C. 20004
Telephone: (202) 662-6000
Facsimile: (202) 662-6291

CERTIFICATE OF SERVICE BY LEXISNEXIS FILE & SERVE

Docket No. MDL 1456

I, Steve W. Berman, hereby certify that I am one of plaintiffs' attorneys and that, on June 21, 2007, I caused copies of **JOINT NOTICE OF FILING PROPOSED ORDER REGARDING FOLLOW UP MAILING TO CONSUMERS WHO HAVE FILED A NOTICE OF EXCLUSION FROM SETTLEMENT** to be served on all counsel of record by causing same to be posted electronically via Lexis-Nexis File & Serve.

/s/ Steve W. Berman

Steve W. Berman

EXHIBIT A

Draft Letter for Consumers on CMS List

Francis E. McGovern
Special Master
United States District Court
GSK Settlement Fund
5210 Hood Road
Palm Beach Gardens, FL 33418

Date

Dear Sir or Madam:

Thank you for responding to the GlaxoSmithKline (GSK) Settlement Fund Notice. The form you submitted indicates that you do not wish to participate in this settlement. If this is correct, please ignore this letter.

However, because some consumers had questions about the settlement and some returned an exclusion form who meant to take part in the settlement, I am writing to clarify your response.

According to Medicare records, you received medical care in your doctor's office or a clinic with one of the medications covered by this settlement. Under the terms of this settlement, if you paid or were charged a percentage of the cost of this medication, you may file a claim for reimbursement. (The names and forms of the covered medications and their common uses are shown on the enclosed blue sheet.)

If you are now interested in making a claim for reimbursement, please follow the instructions on the enclosed Claim Form. Also, please sign below to indicate that you do not want to be excluded from the settlement, and that you wish to file a claim for payment. Return this letter with your signature on it with your completed Claim Form. Send them to GSK AWP Litigation Administrator c/o Complete Claim Solutions, LLC, P.O. Box 24743, West Palm Beach, FL 33416.

If you have any questions about how to complete the form, or problems filling out the form, or if you have questions about the GSK Settlement Fund, please do not hesitate to contact the Claims Center toll free at 1-888-568-7645 (hearing impaired call 1-561-253-7732) between 9:00 A.M. and 5:30 P.M. Eastern time, and a Claims Center representative will be glad to assist you.

Very truly yours,

Francis E. McGovern
Special Master

Please sign here if you want to file a Claim Form and not be excluded from the settlement.

Signature

Draft Letter for Consumers NOT on the CMS List

Francis E. McGovern
Special Master
United States District Court
GSK Settlement Fund
5210 Hood Road
Palm Beach Gardens, FL 33418

Date

Dear Sir or Madam:

Thank you for responding to the GlaxoSmithKline (GSK) Settlement Fund Notice. The form you submitted indicates that you do not wish to participate in this settlement. If this is correct, please ignore this letter.

However, because many consumers had questions about the settlement and some returned an exclusion form who meant to take part in the settlement, I am writing to clarify your response.

Under the terms of this settlement, if you received medical care in your doctor's office or a clinic with one of the medications covered by this settlement, and if you paid or were charged a percentage of the cost of this medication, you may file a claim for reimbursement. (The names and forms of the covered medications and their common uses are shown on the enclosed blue sheet.)

If you are now interested in making a claim for reimbursement, please follow the instructions on the enclosed Claim Form. Also, please sign below to indicate that you do not want to be excluded from the settlement, and that you wish to file a claim for payment. Return this letter with your signature on it with your completed Claim Form. Send them to GSK AWP Litigation Administrator c/o Complete Claim Solutions, LLC, P.O. Box 24743, West Palm Beach, FL 33416.

If you have any questions about how to complete the form, or problems filling out the form, or if you have questions about the GSK Settlement Fund, please do not hesitate to contact the Claims Center toll free at 1-888-568-7645 (hearing impaired call 1-561-253-7732) between 9:00 A.M. and 5:30 P.M. Eastern time, and a Claims Center representative will be glad to assist you.

Very truly yours,

Francis E. McGovern
Special Master

Please sign here if you want to file a Claim Form and not be excluded from the settlement.

Signature

EXHIBIT B

**UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MASSACHUSETTS**

IN RE PHARMACEUTICAL INDUSTRY
AVERAGE WHOLESALE PRICE LITIGATION

MDL No. 1456

THIS DOCUMENT RELATES TO:

ALL ACTIONS

CIVIL ACTION: 01-CV-12257-PBS

Judge Patti B. Saris

**[PROPOSED] ORDER REGARDING FOLLOW UP MAILING TO ALL CONSUMERS
WHO FILED A NOTICE OF EXCLUSION FROM SETTLEMENT**

Having conferred with Prof. Francis McGovern, appointed by the Court as Special Master with respect to the proposed settlement with GlaxoSmithKline (“GSK”), the Court hereby authorizes Complete Claims Solutions, Inc. (“CCS”), the Court appointed Settlement Administrator, to implement a follow up mailing and related claim processing and telephone help line support to all individual consumers who have filed a Notice of Exclusion with respect to the settlement. The mailing will include a cover letter, list of the GSK covered drugs, and a Claim Form.

CCS is hereby authorized to proceed

Dated: June ____, 2007

Patti B. Saris
United States District Judge